

Original or Best
Version Specified
MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM 1-876)

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		CLAIMS	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	*	*
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TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

PTO-1380 (3-76)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

SERIAL NO.	FILING DATE	
APPLICANT(S)		
	*	*
IND.	DEP.	IND.
IND.	DEP.	IND.
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TOTAL IND.		
TOTAL DEP.		
TOTAL CLAIMS		